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APPLICANTS

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** CONTINUING DATA *N/A* *none*** FOREIGN APPLICATIONS *N/A* *none*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
 04/24/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NC	SHEETS DRAWING 4	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 4
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>AM</i>					

ADDRESS

45503

TITLE

Autonomous fail-over to hot-spare processor using SMI

FILING FEE RECEIVED 824	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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